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number.			Application Number	1	49,606	
TRANSMITTAL			Fillng Date	Sept	ember 20, 2005	
F	ORM		First Named Inventor	Raif	Hilfrich	
(to be used for all co	orrespondence after i	nitial filing)	Group Art Unit			
			Examiner Name			
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	•	NATURE (OF APPLICANT, ATTORNEY O	R AGE	NT .	
Firm ProPat, L.L.C. or 425-C South Sharon Amity Road Individual Name Charlotte, NC 28211-2841 Signature Caffly Moore-						
Date August 24, 2006						
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Typed or printed name Claire Wygand						
Signature	Clara	Wua	and_	Date	8/24/06	

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रांत	ProPat, L.L.C.				
or 425-C South Sharon Amil		ty Road			
Individual Name Charlotte, NC 28211-284		11			
Signature	Signature Cathy Moore				
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425-C South Sharon Amity Road

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ProPat, L.L.C.

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To:	USPTO	From:	Claire Wygand for Cathy Moore
	Attention:		Phone: (704) 365-4881
	Mamie P. Person		Fax: (704) 365-4851
Fax:	(571) 270-9985	Pages:	5 pages total
			Facsimile cover sheet (1 pg)
			Transmittal form sent 8/24/06 (1pg)
			Request for Withdrawal sent 8/24/06 (1 pg)
	·		Auto-Reply Facsimile Transmission (1 pg)
			Transmittal Confirmation Report (1 pg)
Phone		Date:	October 20, 2006
Ro:	Application No. 10/549,606	CCı	
	Filed September 20, 2005		
	Our Ref.: 03/026 Virofem		

Dear Ms. Person,

Per our telephone conversation this morning, attached are the documents as indicated above. As we discussed, the submission of documents sent August 24, 2006 have not been entered on the PAIR System as of yet. Please process the documents so that the submission appears on the PAIR System. Thank youyou're your assistance with this matter.

Respectfully submitted,

Claire Wygand

PTO/SB/83 (01-08)
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REQUEST FOR WITHDRAWAL **AS ATTORNEY OR AGENT** AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/549,606	
Filing Date	09/20/2005	
First Named Inventor	Ralf Hilfrich	
Art Unit		
Examiner Name		
Attorney Docket Number	03/026 Virofem	

To: Commissioner t	or Patents						
P.O. Box 1450				•			
Alexandria, VA	22313-1450						
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Telephone 704-365-4881 Email moore@propatilc.com							
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